



Commission on  
Collegiate Nursing  
Education

Serving the  
Public Interest  
Through Quality  
Accreditation

One Dupont Circle, NW  
Suite 530  
Washington, DC  
20036-1120  
202-887-6791  
fax 202-887-8476  
[www.aacn.nche.edu](http://www.aacn.nche.edu)

November 10, 2011

Anita Bralock, PhD, RN, CNM  
Dean and Professor  
School of Nursing  
American University of Health Sciences  
1600 East Hill Street, Building 1  
Signal Hill, CA 90755

Dear Dr. Bralock:

Enclosed please find the report of the evaluation team's findings from the recent accreditation review by the Commission on Collegiate Nursing Education (CCNE) for the baccalaureate degree program in nursing at American University of Health Sciences.

It is important to CCNE that this report accurately represents your program. CCNE requests a written response to the team report on institutional letterhead. This response may:

1. address any errors of fact or misinterpretations of data as well as comments regarding any of the team's findings with which you may disagree;
2. provide additional information you believe is pertinent and would assist the CCNE Board of Commissioners in making an informed decision about the accreditation of your program; and/or
3. if appropriate, indicate that there are no concerns and that the institution is in agreement with the report.

Your written response must be received at the CCNE office no later than November 27, 2011.

1. If your response is one page or less, please email it to Cristina Walcott, CCNE Administrative Assistant, at [cwalcott@aacn.nche.edu](mailto:cwalcott@aacn.nche.edu). There is no need to mail a hard copy.
2. If your response is longer than one page, please mail to the CCNE offices 15 paper copies (double-sided) and an electronic storage device (e.g. thumb drive) containing your complete response (including the cover letter and all attachments saved as a single file). Be sure to include the institution's name, city, and state in the file name.

While no changes will be made to the team report, a copy of your response will be appended to the report when it is distributed to the Accreditation Review Committee (ARC) and to the CCNE Board of Commissioners. Please note that your response will also be shared with the evaluation team.

Based on the information provided, the ARC will formulate a confidential accreditation recommendation, which will be forwarded only to the CCNE Board of Commissioners. The ARC is scheduled to meet on March 8-10, 2012. Please note that CCNE does not require program officials to attend the ARC meeting. If you would like to receive more information about participating in that meeting, please contact Lori Schroeder, CCNE Associate Director, at [lschroeder@aacn.nche.edu](mailto:lschroeder@aacn.nche.edu) no later than February 22, 2012.

The Board will make an accreditation decision about your program at its April 26-28, 2012 meeting. Within 30 days of the Board meeting, CCNE will notify you and the chief executive officer of your institution of the accreditation decision. A copy of the enclosed team report and your response to it will be sent to your institution's chief executive officer, as well.

Again, I would like to thank you and your colleagues for inviting CCNE to evaluate the nursing program as part of the accreditation review process. If you have any further questions, please do not hesitate to ask.

Sincerely,

A handwritten signature in black ink that reads "Jennifer Butlin". The signature is written in a cursive style with a period at the end.

Jennifer Butlin, EdD  
Director

EVALUATION TEAM REPORT ON THE ACCREDITATION REVIEW  
OF THE BACCALAUREATE PROGRAM  
AT  
AMERICAN UNIVERSITY OF HEALTH SCIENCES SCHOOL OF NURSING

COMMISSION ON COLLEGIATE NURSING EDUCATION  
ON-SITE EVALUATION: OCTOBER 3-5, 2011  
EVALUATION TEAM:  
Nancy O. DeBasio, PhD, RN, Team Leader  
Tim Bredow, PhD, RN  
Gale Moore Bucher, MSN, RN, CNS

## TABLE OF CONTENTS

INTRODUCTION .....	1
MEETING OF CCNE STANDARDS.....	3
Standard I. Program Quality: Mission and Governance .....	3
Standard II. Program Quality: Institutional Commitment and Resources .....	10
Standard III. Program Quality: Curriculum and Teaching-Learning Practices.....	17
Standard IV. Program Effectiveness: Aggregate Student and Faculty Outcomes.....	23

## Introduction

This report presents the findings of the evaluation team from the Commission on Collegiate Nursing Education (CCNE), the accrediting body devoted exclusively to the evaluation of baccalaureate and graduate degree programs in nursing, regarding the Bachelor of Science in Nursing (BSN) at the American University of Health Sciences School of Nursing and its compliance with CCNE's standards for accreditation. The BSN program is being reviewed for initial accreditation.

Founded in 1994, the American University of Health Sciences (AUHS) was formerly known as the American Institute of Health Sciences. The university's mission is to educate and equip students for careers in the health field based on core values rooted in a strong belief in God and Christian values. AUHS is the first private, proprietary, minority owned institution of higher education in California. The university including the School of Nursing (SON) is dedicated to educating students from ethnic and culturally diverse populations. AUHS promotes its mission by creating a strong and caring academic environment where excellence, diversity, and the development of the entire person is addressed, and where teaching and learning, research, service and scholarship is valued and supported.

The university offers two programs of study which lead to the baccalaureate degree: the Bachelor of Science in Nursing {BSN} and a newly implemented Bachelor of Science in Pharmaceutical Science. The university also offers a graduate degree in Clinical Research and a certificate for pharmacy technicians. The total number of students in all programs totals 211; at the time of the visit there were 141 students enrolled in the nursing program. There are a total of 54 faculty and staff; seven are full-time nursing faculty and two are permanent part-time faculty. The university was granted the authority to award degrees from the Accrediting Council for Independent Colleges and Schools {ACICS} in 2004. A follow up progress visit to this initial accreditation occurred in 2007. At that time the university was granted continuing accreditation for a five year period through 2012.

AUHS is located on six acres in Signal Hill, California which is adjacent to the thriving, diverse community of Long Beach. The nursing program is located in one of three buildings housing classrooms, administrative and faculty offices, and a skills laboratory. The California Board of Registered Nursing (CBRN) granted approval to the SON in 2006; the next CBRN review is

scheduled for Spring 2012. Following CBRN approval, the SON was founded in 2007 and graduated its first students in 2009.

The team was afforded full cooperation in its efforts to assess the program and to confirm the self-study document. The team would like to take this opportunity to thank the program for its hospitality and consideration during the on-site evaluation.

## Meeting of CCNE Standards

While visiting the campus in Signal Hill, the evaluation team had an opportunity to interview school and university officials; program faculty, students, and alumni; and community representatives. The team reviewed information in the self-study document and in the resource room, as well as other materials provided at its request. In addition, the team also observed classroom and clinical activities. The following assessments were made regarding compliance with the CCNE *Standards for Accreditation of Baccalaureate and Graduate Degree Nursing Programs* by the baccalaureate degree program.

### **STANDARD I PROGRAM QUALITY: MISSION AND GOVERNANCE**

**The mission, goals, and expected aggregate student and faculty outcomes are congruent with those of the parent institution, reflect professional nursing standards and guidelines, and consider the needs and expectations of the community of interest. Policies of the parent institution and nursing program clearly support the program’s mission, goals, and expected outcomes. The faculty and students of the program are involved in the governance of the program and in the ongoing efforts to improve program quality.**

This standard is **met** for the baccalaureate program.

**I-A. The mission, goals, and expected student outcomes are congruent with those of the parent institution and consistent with relevant professional nursing standards and guidelines for the preparation of nursing professionals.**

*Elaboration: The program’s mission statement, goals, and expected student outcomes are written and accessible to current and prospective students. A mission statement may relate to all nursing programs offered by the nursing unit or specific programs may have separate mission statements. Program goals are clearly differentiated by level when multiple degree programs exist. Expected student outcomes are clear and may be expressed as competencies, objectives, benchmarks, or other language congruent with institutional and program norms.*

*The program identifies the professional nursing standards and guidelines it uses, including those required by CCNE and any additional program-selected guidelines. A program preparing students for specialty certification incorporates professional standards and guidelines appropriate to the specialty area. A program may select additional standards and guidelines (e.g., state regulatory requirements), as appropriate. Compliance with required and program-selected professional nursing standards and guidelines is clearly evident in the program.*

**Compliance Concerns?**

Baccalaureate:

No

**Rationale:** Mission, goals, philosophy and terminal objectives [expected student outcomes] are written and accessible to current/prospective students. Students were able to articulate mission and expected outcomes during the group interview session. Professional nursing standards including the American Nurses Association's (ANA) *Nursing: Scope and Standards of Practice* (2010), the American Association of the Colleges of Nursing's (AACN) *The Essentials of Baccalaureate Education for Professional Nursing Practice* (2008) (*Baccalaureate Essentials*), the CBRN minimum standards, the ANA *Public Health Nursing Scope and Standards*, and the ANA *Code of Ethics* were evident through a review of course syllabi and required work, discussions with faculty and students and the community of interest. The CBRN requires that BSN programs provide community health/public health content in order for students to be eligible to receive a certificate in public health nursing upon graduation. One faculty member who holds an MPH is responsible for this course. Evaluators did note an inconsistency in use of language related to expected student outcomes. On p. 5 of the self-study document, the terms "program objectives/student outcomes" were utilized; on page 48, the term "program objectives [terminal]" was used; however both the AUHS 2011-2012 catalog and student handbook utilize the term "terminal objectives". Evaluators clarified with the dean and faculty that "terminal objectives" was the term that faculty were using to represent student learning outcomes. Consistency across documents will ensure clarity for prospective and current students as well as other members of the SON's community of interest.

**I. B. The mission, goals, and expected student outcomes are reviewed periodically and revised, as appropriate, to reflect:**

- **professional nursing standards and guidelines; and**
- **the needs and expectations of the community of interest.**

*Elaboration: There is a defined process for periodic review and revision of program mission, goals, and expected student outcomes. The review process has been implemented and resultant action reflects professional nursing standards and guidelines. The community of interest is defined by the nursing unit. The needs and expectations of the community of interest are reflected in the mission, goals, and expected student outcomes. Input from the community of interest is used to foster program improvement. The program afforded the community of interest the opportunity to submit third-party comments to CCNE, in accordance with accreditation procedures.*

**Compliance Concerns?**

Baccalaureate: No

**Rationale:** There is a defined timeline for collection of data in Appendix C: SON Systematic Evaluation Plan (SEP), on page 134 of the self-study document. The plan identifies type of data, frequency and subsequent measurement dates. The plan as presented lacks expected and

actual outcomes and responsible individuals/committees for collection, analysis and action plans. The June 2010 minutes of the faculty council provided evidence that the mission and outcomes were reviewed and approved; however, the SEP lists that program objectives and mission were to be reviewed every five years with the next evaluation in 2012. The faculty and the dean indicated that this review occurred in 2010 as part of the process of preparation for the CCNE on-site evaluation. The strategic plan located in Appendix B of the self-study document does provide benchmarks and metrics for outcomes such as NCLEX-RN ® results, diversity, enrollment targets, and faculty productivity. Table 4.11 Comparison of Expected Student Outcomes and Actual Student Outcomes (p. 63 of the self-study document) does provide some analysis of program objectives as compared to the *Baccalaureate Essentials*. Expected outcomes (noted as benchmarks) are compared to actual outcomes with results and plans of action identified. However, there is a lack of clarity as to how these documents are integrated to provide a systematic evaluation plan. Faculty council minutes of June 2010, indicated that faculty voted to support the revised mission and the program (terminal) objectives.

Twenty-five individuals representing a wide variety of agencies attended the luncheon meeting with the CCNE evaluators. It was evident to the team that members of the community of interest had sufficient mechanisms to provide feedback to the faculty and senior program administration. The representative from a large hospital system noted that there was an issue with a clinical faculty who was not providing the appropriate level of instruction and guidance for students. Students provided input as did the agency. The situation and data were reviewed by the SON and the clinical instructor was removed from the clinical environment. The representative from the California Institute for Nursing and Health Care spoke to the need for the addition of a private baccalaureate program in the state to address the Institute on Medicine's (IOM) recommendation to increase the number of BSN prepared graduates. California produces 70% of its nursing graduates from community colleges. Budget cuts have eliminated summer coursework and severely curtailed enrollments in all public programs. She further noted that the AUHS SON has produced excellent graduates who live out the mission through their actions in the community and their work settings. A representative from the Cambodian community spoke to the engagement of the SON faculty and students in work with their community so as to more fully understand the culture and to facilitate the reduction of significant health disparities in this population. Another shared that students participate in the regularly scheduled feet washing for the homeless population at the Church of Love.

A review of the minutes of the March 2011 advisory committee and meetings with clinical affiliates reflect feedback from clinical agencies regarding the burden placed on them by having two senior level courses which require individual preceptors. The dean indicated that faculty are engaged in the review and possible revision of the senior courses which will potentially lead to one final senior immersion course and an additional medical-surgical course. Faculty confirmed these discussions; one additional faculty with expertise in medical-surgical nursing was hired three weeks prior to the on-site evaluation. The dean confirmed that this faculty member would be instrumental in the development and instruction of the additional course. Evaluators confirmed through review of annual minutes beginning in 2008 that the advisory committee provided feedback on the need for a more structured faculty orientation regarding clinical expectations; protocol for clinical adjuncts who did not meet their responsibilities; need for additional clinical sites; and potential collaboration around clinical simulation. The dean and the associate chief academic officer confirmed that there is a more structured faculty orientation in place and a process to monitor and remove if necessary clinical adjunct faculty.

As part of the review, the team verified that the program afforded the opportunity for constituents to submit third-party comments directly to CCNE. Evaluators noted that third party notification was placed on the AUHS website and on flyers in the SON building. Evaluators reviewed letters sent to clinical sites by the dean of the SON. One letter was received and was considered in the evaluation process.

**I-C. Expected faculty outcomes in teaching, scholarship, service, and practice are congruent with the mission, goals, and expected student outcomes.**

*Elaboration: Expected faculty outcomes are clearly identified by the nursing unit, are written, and are communicated to the faculty. Expected faculty outcomes are congruent with those of the parent institution.*

**Compliance Concerns?**

Baccalaureate: No

**Rationale:** Faculty confirmed that new faculty are provided an orientation to their roles in teaching, scholarship and service upon hire. The associate chief academic officer noted that the goal for new faculty was to promote ongoing professional development from their initial date of hire. One faculty who was hired three weeks prior to the on-site evaluation indicated that she received a full day of orientation which included the use of Moodle, a review of the faculty and student handbooks and a discussion of the SON's structure and governance within the context of the university as a whole. Faculty provided examples of support of teaching such as

mentoring with senior faculty; participation in the California State-Domingues Hills nurse educator course with didactic and practicum experiences; attendance at the “Magic in Nursing” conference sponsored by the California Institute of Nursing and Health Care; and attendance at a Quality and Safety Education for Nurses (QSEN) workshop. A two-day program on teaching strategies, plagiarism, and the use of simulation was recently provided on campus for all faculty. Evaluators noted evidence of support for scholarly activities including workshops on writing for publication and grant writing offered by a member of the SON community of interest. Evaluators confirmed the recently published article which was noted in the self-study document. Faculty confirmed that service is clearly delineated as an expected outcome; examples of community service and mission trips were identified.

**I-D. Faculty and students participate in program governance.**

*Elaboration: Roles of the faculty and students in the governance of the program, including those involved in distance education, are clearly defined and promote participation.*

**Compliance Concerns?**

Baccalaureate:

No

**Rationale:** Evaluators reviewed minutes of the general faculty council, curriculum, assessment and evaluation, student affairs, faculty affairs, student admissions and retention and the AUHS Senior Leadership Council. The roles of faculty are clearly defined in the bylaws, which were revised in July 2010 (faculty council minutes). Evaluators confirmed through a review of student affairs committee minutes, student participation in discussions on recycling, a big brother/big sister program, ventilation in the student lounge, and faculty deadlines on class postings. Input on committees is provided through designated Student Nurses Association (SNA) representatives who act on behalf of each cohort. Students noted that feedback from the SNA representative to the student affairs committee on the issue of a mandatory learning laboratory requirement led to a mutually acceptable and educationally sound resolution.

A review of committee minutes confirmed that all full-time faculty participate on all committees as there are only seven full-time faculty. Evaluators found the following examples of faculty participation: utilization of stated criteria for admissions decisions and engaged in discussions related to review of grading policies and remediation/progression of students(admission committee minutes 2010-2011); approval of the revised SON mission and objectives and revision of the student handbook (faculty council June 2010); and approval of a new faculty organizational structure with a revised committee structure (faculty council October 2009).

**I-E. Documents and publications are accurate. References to the program’s offerings, outcomes, accreditation/approval status, academic calendar, recruitment and admission policies, transfer of credit policies, grading policies, degree completion requirements, tuition, and fees are accurate.**

*Elaboration: A process is used to notify constituents about changes in documents and publications. Information regarding licensure and/or certification examinations for which graduates will be eligible is accurate.*

**Compliance Concerns?** Baccalaureate: No

**Rationale:** Evaluators reviewed faculty and student handbooks; the AUHS 2011-2012 catalog, recruitment brochure and flyer, and website. Generally documents, publications and the website were consistent in the presentation of information. Evaluators noted that one of the recruitment flyers had information regarding requirements for laboratory science that were inconsistent with the 2011-2012 AUHS catalog and the BSN brochure. Review of the university catalog revealed there was an incomplete listing of university faculty; however, evaluators were provided with an updated list of faculty. The tuition and fee schedule in the catalog was incorrectly identified as for the 2010-2011 academic year. In addition, the table of fees and tuition cost lacked clarity regarding the tuition for the BSN. The dean and the chief business officer clarified that the tuition listed was for the 36 month program rather than for one academic year. In relation to all other areas, documents and publications reflected accuracy and consistency. Current accreditation status by the Accrediting Council for Independent Colleges and Schools (ACICS) and the California Bureau of Private Post-Secondary Education was confirmed through a review of documents in the resource room.

**I-F. Academic policies of the parent institution and the nursing program are congruent. These policies support achievement of the mission, goals, and expected student outcomes. These policies are fair, equitable, and published and are reviewed and revised as necessary to foster program improvement. These policies include, but are not limited to, those related to student recruitment, admission, retention, and progression.**

*Elaboration: Nursing faculty are involved in the development, review, and revision of academic program policies. Differences between the nursing program policies and those of the parent institution are identified and are in support of achievement of the program’s mission, goals, and expected student outcomes. Policies are written and communicated to relevant constituencies. Policies are implemented consistently. There is a defined process by which policies are regularly reviewed. Policy review occurs and revisions are made as needed.*

**Compliance Concerns?** Baccalaureate: No

A review of policies of the nursing program and the university reflect congruence except in areas where noted. Examples of evidence in committee minutes include application of admission and progression policies in a consistent manner, review of policies related to grading to ensure consistency across cohorts, and the implementation of a student dress code to reflect the professional image of nursing. As noted above, the student handbook was revised in June 2010 to ensure that students are provided with accurate, updated information.

**I-G. There are established policies by which the nursing unit defines and reviews formal complaints.**

*Elaboration: The program's definition of a formal complaint and the procedure for filing a complaint are communicated to relevant constituencies. The program follows its established policies/procedures for formal complaints.*

**Compliance Concerns?**

Baccalaureate: No

**Rationale:** Evaluators confirmed that there is a stated formal complaint policy in place. Students indicated that faculty review the student handbook in the first quarter of their class work which includes a discussion of the formal complaint process.

**STANDARD II**  
**PROGRAM QUALITY: INSTITUTIONAL COMMITMENT AND RESOURCES**

**The parent institution demonstrates ongoing commitment and support for the nursing program. The institution makes available resources to enable the program to achieve its mission, goals, and expected aggregate student and faculty outcomes. The faculty, as a resource of the program, enables the achievement of the mission, goals, and expected aggregate student outcomes.**

This standard is **met** for the baccalaureate program.

**II-A. Fiscal and physical resources are sufficient to enable the program to fulfill its mission, goals, and expected outcomes. Adequacy of resources is reviewed periodically and resources are modified as needed.**

*Elaboration: The budget enables achievement of the program's mission, goals, and expected student and faculty outcomes. The budget also supports the development, implementation, and evaluation of the program. Compensation of nursing unit personnel supports recruitment and retention of qualified faculty and staff. Physical space is sufficient and configured in ways that enable the program to achieve its mission, goals, and expected student and faculty outcomes. Equipment and supplies (e.g., computing, laboratory, and teaching-learning) are sufficient to achieve the mission, goals, and expected student and faculty outcomes. There is a defined process for regular review of the adequacy of the program's fiscal and physical resources. Review of fiscal and physical resources occurs and improvements are made as appropriate.*

**Compliance Concerns?**

Baccalaureate:

No

**Rationale:** Evaluators confirmed that fiscal and physical resources are sufficient to enable the program to fulfill its mission, goals and expected outcomes. Review of the institution's 2011 and 2012 budget documents and discussion with the chief business officer affirm that the SON is the largest department within AUHS and consequently, the SON's personnel and physical needs requires approximately 80% of the university's budget. As noted in the self-study document, resource allocation to the SON has more than doubled in the time period from 2007 to the present. He further confirmed that the SON dean holds fiscal responsibility for the program. A review of minutes of the AUHS Leadership Council and interactions with the dean, the associate chief academic officer, the president and the vice-president of the college governing board confirmed that the dean actively participates in the university budgeting process. Interviews with the dean, the chief business officer and the associate chief academic officer indicated that the dean provides projections for needed resources including faculty and staff as well as a list of potential development activities for the budget year. Projected enrollments are also utilized to determine revenue generation and necessary resources. The chief business officer noted that the dean has a discretionary fund and business credit card which may be used for small

equipment or other necessary items. Generally this totals approximately \$25,000 annually and is a line item in the budget.

According to documentation provided on site, SON faculty salaries are reviewed annually and are competitive with other AUHS departments and compare favorably with the AACN metrics for private, religious programs in the western part of the country. Faculty reported that salaries are competitive in the market and facilitate recruitment nationwide. In an interview with the chief business officer, he confirmed that \$3.6 million has been dedicated to date to attract and retain the best faculty. Faculty confirm that professional development is a major priority citing that they receive \$3500 annually to support conference attendance, continuing education, and doctoral education. The chief business officer noted that there was funding in the SON budget for support of research which has not yet been utilized. A 10% increase in average SON instructor salary was reported from 2009 to 2010.

Evaluators toured the building where the nursing program is housed. Physical resources available to the SON appear sufficient to support the present size of the program and to support the achievement of expected outcomes. Classroom, office, library, study spaces and skills laboratory, simulation and other equipment observed during the visit were adequate. The skills laboratory was equipped with seven beds and included one high fidelity manikin and additional low fidelity manikins. Two to three students were accommodated per station which fits the current student body; however, additional space may be necessary with increased enrollment. Classrooms included state of the art technology, such as smart boards, LED projection with internet access and wireless capabilities. Adequacy of resources is reviewed annually during the budget planning process. In interviews with faculty they indicated that when equipment and supplies are needed, they submit requests to the dean which are generally approved. They noted that the tools necessary to provide excellent instruction and support for student learning were readily available.

**II-B. Academic support services are sufficient to ensure quality and are evaluated on a regular basis to meet program and student needs.**

*Elaboration: Academic support services (e.g., library, technology, distance education support, research support, admission, and advising services) are adequate for students and faculty to meet program requirements and to achieve the mission, goals, and expected student and faculty outcomes. There is a defined process for regular review of the adequacy of the program's academic support services. Review of academic support services occurs and improvements are made as appropriate.*

**Compliance Concerns?**

Baccalaureate: No

**Rationale:** Evaluators confirmed through interviews with faculty and students that support services were more than sufficient to support achievement of program outcomes. Evaluators' interviews with the directors of student services, financial aid, career services, community engagement, information technology (IT) and computer services confirmed the self-study document. The student services director spoke to the common mission of faculty and staff to recruit and retain students. The director meets with all students interested in nursing and provides an overview of the expectations of the program. She indicated that through these sessions she and the student are able to determine if this is the right career path; her goal is to ensure that students will be in the optimum position for success. Her efforts are based on the fact that this diverse population often needs additional support even in the application process. She also cited examples of how faculty refer students for support services such as ESL workshops, counseling sessions, writing and conversational english workshops and student learning enhancement activities. Her relationships with faculty and students enhance the SON's ability to retain this very diverse population of students who have multiple needs. Students confirmed that the director of student services has provided them with opportunities that have allowed them to continue in the program.

Meetings with library services and IT staff confirmed the self-study document. Students reported that had ready access to online databases including CINAHL and Medline, more than 45 journals and 35 medical textbooks, as well as interlibrary loan services. The librarian provides workshops to students and faculty on how to search online databases and also provides assistance in searching for information by email request from students. During interviews, the students and faculty reported that they use the library resources and expressed their appreciation of the librarian's expertise and contribution to teaching and learning.

Evaluators' interviews with the admissions advisor and financial aid staff confirmed the self-study document that approximately eighty percent (80%) of SON students receive some form of financial aid including Pell Grants, Veteran's Benefits, Supplemental Educational Opportunity Grants and Plus Loan Scholarships. AUHS also offers personal scholarships and fellowships to students who qualify.

Based on interviews and review of facilities and program documents, students, faculty and staff are provided opportunities to evaluate support services. Evaluators confirmed that feedback from students and faculty have led to the addition of services for students.

**II-C. The chief nurse administrator:**

- **is a registered nurse (RN);**
- **holds a graduate degree in nursing;**
- **is academically and experientially qualified to accomplish the mission, goals, and expected student and faculty outcomes;**
- **is vested with the administrative authority to accomplish the mission, goals, and expected student and faculty outcomes; and**
- **provides effective leadership to the nursing unit in achieving its mission, goals, and expected student and faculty outcomes.**

*Elaboration: The chief nurse administrator has budgetary, decision-making, and evaluation authority that is comparable to that of chief administrators of similar units in the institution. He or she consults, as appropriate, with faculty and other communities of interest, to make decisions to accomplish the mission, goals, and expected student and faculty outcomes. The chief nurse administrator is perceived by the communities of interest to be an effective leader of the nursing unit. The program provides a rationale if the chief nurse administrator does not hold a graduate degree in nursing.*

**Compliance Concerns?**

Baccalaureate:

No

**Rationale:** Evaluators confirmed through interviews with members of the senior leadership council and faculty that the chief nurse administrator has budgetary, decision making and evaluation authority for the nursing program at AUHS comparable to deans of other schools on campus. As noted in II. A, the dean is engaged in the development and administration of the budget and has a discretionary fund which may be used by the dean as needed.

Review of the dean's curriculum vitae and other documents in the resource room confirmed that the dean is both academically and experientially qualified to provide effective leadership to the program. The dean has an extensive history of teaching at the baccalaureate level; has held a departmental chair role and was responsible for oversight of three campuses' second degree programs in the southern California area. Senior leadership, faculty, staff, and members of the SON's community of interest spoke highly of the dean and are confident that she has the leadership expertise necessary to ensure that the mission, goals and expected outcomes of the program are achieved. They also noted that the dean provides strong support and leadership to the nursing profession at the local, state and national levels.

**II-D. Faculty members are:**

- **sufficient in number to accomplish the mission, goals, and expected student and faculty outcomes;**
- **academically prepared for the areas in which they teach; and**
- **experientially prepared for the areas in which they teach.**

*Elaboration: The full-time equivalency (FTE) of faculty involved in each program is clearly delineated, and the program provides to CCNE its formula for calculating FTEs. The mix of full-time and part-time faculty is appropriate to achieve the mission, goals, and expected student and faculty outcomes. Faculty-to-student ratios ensure adequate supervision and evaluation and meet or exceed the requirements of regulatory agencies and professional nursing standards and guidelines.*

*Faculty are academically prepared for the areas in which they teach. Academic preparation of faculty includes degree specialization, specialty coursework, or other preparation sufficient to address the major concepts included in courses they teach. Faculty teaching in the nursing program have a graduate degree. The program provides a rationale for the use of any faculty who do not have a graduate degree.*

*Faculty who are nurses hold current RN licensure. Faculty teaching in clinical/practicum courses are experienced in the clinical area of the course and maintain clinical expertise. Clinical expertise may be maintained through clinical practice or other avenues. Faculty teaching in advanced practice clinical courses meet certification and practice requirements as specified by the relevant regulatory and specialty bodies. Advanced practice nursing tracks have lead faculty who are nationally certified in that specialty.*

**Compliance Concerns?**

Baccalaureate:

No

**Rationale:** Review of faculty vitae, observations of classroom and clinical experiences and discussions with faculty confirmed that faculty are experienced in the areas in which they teach. All hold current California licenses and are approved per California guidelines for faculty. For example, one faculty who holds an MPH is the course faculty for the community health didactic and clinical course. Based on California requirements for BSN programs, students must complete a requisite number of hours in community/public health. Students then graduate with a certificate in public health. Permanent part-time faculty as well as clinical adjuncts curriculum vitae were reviewed.

Processes for locating, hiring and promoting instructors are found in the AUHS faculty handbook. The normal faculty workload is fifty-six units each quarter. AUHS considers nursing workload as faculty/student contact hours. In general, SON faculty teach 12-14 contact hours/quarter (commensurate with other university faculty). Interviews with SON faculty and examples of workload described by SON faculty confirmed that the workload structure is effective and equitable and enables them to achieve the mission and outcomes of the program.

Review of current faculty documents confirmed that there are seven full-time faculty including the dean, 11 part-time and two adjunct instructors. Three (3) faculty hold a PhD in nursing and all other faculty hold master's degrees. Faculty have education and expertise in the areas in which they teach. Review of the current quarter class schedule affirmed that faculty teach in courses which align with their content and clinical expertise. Student evaluations of faculty in class and clinical provided evidence to the team that faculty are assigned appropriately and qualified to teach the curriculum. Review of student course evaluations also reflected that students perceive faculty as excellent teachers.

**II-E. When used by the program, preceptors, as an extension of faculty, are academically and experientially qualified for their role in assisting in the achievement of the mission, goals, and expected student outcomes.**

*Elaboration: The roles of preceptors with respect to teaching, supervision, and student evaluation are clearly defined; congruent with the mission, goals, and expected student outcomes; and congruent with relevant professional nursing standards and guidelines. Preceptors have the expertise to support student achievement of expected learning outcomes. Preceptor performance expectations are clearly communicated to preceptors.*

**Compliance Concerns?**

Baccalaureate: No

**Rationale:** Review of the AUHS SON materials including the preceptor packet confirmed that preceptors receive information on the 36 month program, mission, program objectives/learning outcomes, the definition of the clinical preceptor and specific role responsibilities for preceptors, faculty and students. Learning contract information is provided as guidance for students and preceptors related to the student's development of learning outcomes, specific learning activities to achieve specified outcomes and evaluation of achievement. Evaluators confirmed through a review of the preceptor list for N450L, N440L and N430L and curriculum vitae for each preceptor that preceptors are used appropriately based on credentials and areas of expertise. A preceptor orientation workshop event is planned annually according to SON faculty assessment and evaluation committee minutes.

**II-F. The parent institution and program provide and support an environment that encourages faculty teaching, scholarship, service, and practice in keeping with the mission, goals, and expected faculty outcomes.**

*Elaboration: Institutional support is available to promote faculty outcomes congruent with defined expectations of the faculty role and in support of the mission, goals, and expected student outcomes. For example:*

- *Faculty have opportunities for ongoing development in pedagogy.*

- *If research is an expected faculty outcome, the institution provides resources to support faculty research.*
- *If practice is an expected faculty outcome, opportunities are provided for faculty to maintain practice competence, and institutional support ensures that currency in clinical practice is maintained for faculty in roles which require it.*
- *If service is an expected faculty outcome, expected service is clearly defined and supported.*

**Compliance Concerns?**

Baccalaureate:

No

**Rationale:** AUHS offers an allowance for professional development of \$3,500.00 per faculty member per year that includes conference registration and associated expenses. The faculty stated that development funds have been used to attend conferences and workshops. Two faculty were awarded scholarships to attend a course for new nursing instructors incorporating didactic and clinical teaching experience with an instructor-preceptor and students. Another faculty member used faculty development funds to attend the QSEN conference. Information learned from these conferences will be shared with colleagues in a formal presentation.

The administration values nursing as a practice profession, supporting career development through work in the area of each faculty member's expertise. Several nursing faculty members work in practice settings to augment and update clinical skills, including two clinics supported by AUHS. Support for scholarship includes access to online databases and journals. Faculty development through the university includes educational development on grant writing and publishing. According to interviews with the president and vice-president of the governing board, the university recognizes teaching excellence through an annual teaching excellence award. The university also reimburses tuition for doctoral studies.

The university holds membership in national and regional organizations supporting their mission of teaching and service. Memberships are listed in the university catalog. Expectations and examples of faculty teaching, scholarship, research, service and practice in keeping with the mission, goals, and expected outcomes of the program are clearly outlined in the faculty handbook. Examples of faculty scholarship are seen in the development of new courses, attendance at workshops and use of innovative teaching strategies.



*Elaboration: Each degree program incorporates professional nursing standards and guidelines relevant to that program/area. The program clearly demonstrates where and how content, knowledge, and skills required by identified sets of standards are incorporated into the curriculum.*

**Compliance Concerns?**

Baccalaureate: No

**Rationale:** The SON offers the BSN degree as its sole program of study. Evaluators confirmed through review of syllabi, course assignments, and other materials in the resource room that the curriculum incorporates professional nursing standards and guidelines as stated in the self-study document. In interviews with faculty, they demonstrated an understanding of how the *Baccalaureate Essentials* are integrated throughout the courses they teach. One faculty cited a specific example starting with the SON mission leading to her course level objectives. A review of minutes and discussions with faculty provided evidence that faculty met extensively to map the professional standards and guidelines to courses and student learning outcomes. This work is reflected in the self-study document where each course is mapped to the corresponding AACN *Baccalaureate Essentials* element.

**III-C. The curriculum is logically structured to achieve expected individual and aggregate student outcomes.**

- **The baccalaureate curriculum builds upon a foundation of the arts, sciences, and humanities.**

*Elaboration: Baccalaureate program faculty and students articulate how knowledge from courses in the arts, sciences, and humanities is incorporated into nursing practice. Post-baccalaureate entry programs in nursing incorporate the generalist knowledge common to baccalaureate nursing education as delineated in *The Essentials of Baccalaureate Education for Professional Nursing Practice* (AACN, 2008) as well as advanced course work.*

*Advanced Nursing Practice* (AACN, 2006). The program provides a rationale for the sequence of the curriculum for each program.

**Compliance Concerns?**

Baccalaureate: No

**Rationale:** The baccalaureate curriculum builds upon a foundation of the arts, sciences and humanities. Course syllabi, course materials, and committee minutes reviewed in the resource room and discussions with students and general education and nursing faculty confirmed that nursing courses build upon the general education foundational content. Review of student materials and interviews confirmed that students utilize knowledge from the liberal arts and sciences including the following examples: use of nutrition content as a basis to evaluate a

patient when doing a head to toe physical exam in the physical assessment course; application of principles of sociology to analyze Chinese clients who come for care in Nur 260, and the application of knowledge from microbiology In Gerontology (Nur300) to understand the problems aging adults have with decreased antibody production.

The baccalaureate curriculum is designed to move students from simple to complex. A review of syllabi revealed that objectives are leveled and become more complex. For example, students begin with 200 level courses that are broad and introductory and progress to 300 and 400 level courses where concepts and advanced nursing theories are incorporated into critical thinking and problem solving to provide culturally competent care. The use of clinical judgment and decision making is also evident in the clinical course syllabi, course objectives, observation at the clinical sites, and in discussion with students. Evaluators confirmed that assignments and evaluation of students parallel the increasing complexity in learning objectives.

Evidence that students are learning the skills and competencies necessary for entry level baccalaureate practice was noted during visits to the classroom and clinical agency sites. In a meeting with the community of interest, the representatives from two area hospitals stated that nursing graduates from AUHS SON were well prepared and whenever possible were sought for employment.

**III-D. Teaching-learning practices and environments support the achievement of expected individual student learning outcomes and aggregate student outcomes.**

*Elaboration: (classroom, clinical, laboratory, simulation, distance education) support achievement of expected individual student learning outcomes identified in course, unit, and/or level objectives.*

**Compliance Concerns?**

Baccalaureate: No

**Rationale:** Teaching-learning practices and environments support the achievement of expected individual student learning. During on-site classroom and clinical visits faculty were observed using a variety of teaching strategies including lecture, discussion, student presentations, demonstration and modeling. A review of syllabi confirmed the use of these teaching strategies as well as several methods of evaluation including written papers, examinations, and psychomotor demonstrations.

Each classroom is well-equipped with smart boards and sufficient, comfortable seating with desks to accommodate student learning. The nursing laboratory has seven stations that are equipped with appropriate nursing supplies and equipment to simulate a “real” situation to practice nursing skills and to demonstrate critical thinking for selected laboratory scenarios. During a visit to the laboratory, evaluators observed a group of students practicing physical assessment of the head and neck. The faculty member was circulating among the groups of students located at each of the stations that had been set up at the bedside and was commenting on technique and answering a variety of questions. The continuity of the classroom content was evident in the laboratory. The students had been assigned readings and had lecture on the content the day prior. Upon arrival students completed a quiz about the head and neck assessment. After discussing the quiz students practiced the assessment skill. Two areas of student clinical experience were observed during the on-site evaluation. In both cases, the students were found to be well supervised by an SON faculty person. Additionally, the students were very engaged with the patients and staff of the clinical learning site. When questioned, the students were able to relate their clinical experience to the mission of the program and the objectives of the class.

**III-E. The curriculum and teaching-learning practices consider the needs and expectations of the identified community of interest.**

*Elaboration: Teaching-learning practices are appropriate to the student population and build on prior learning. Teaching-learning practices consider the needs of the program-identified community of interest (e.g., use of distance technology, simulation, adult learner needs, second language students).*

**Compliance Concerns?**

Baccalaureate:

No

**Rationale:** One of the SON’s identified communities of interest is their diverse student population, which is composed in part by adult as well as traditional age students. Discussion with students indicated that many of them selected AUHS SON because of their interest in working with the homeless and with populations in the immediate Long Beach area where there are major health disparity gaps. Faculty make extensive efforts to engage students in the classroom through individual attention in class and in the clinical setting. During an observation of a lecture on the older adult, the evaluator noted that the faculty member asked each student to read an objective as she was conducting the class. When queried by the evaluator as to the rationale for this technique, she indicated that this facilitates interaction among the particular

cultural groups represented in the classroom. This strategy was built upon an understanding of the learning styles of these students.

At a luncheon attended by over 25 representatives of the SON's community of interest, individuals spoke of places where students work with diverse populations who are representative of groups with major health disparities. Having clinical experiences at these unique sites enables students to utilize and build upon their previous course work in general education and in nursing. Students were appreciative of these clinical sites and were able to articulate how the work they were doing there was congruent with the college's vision and mission statements.

The resource room contained contractual agreements with all of the clinical sites utilized by the SON .The SON has specifically targeted these clinical sites in order to provide the diverse student population with unique experiences that support the achievement of their mission and student learning outcomes.

**III-F. Individual student performance is evaluated by the faculty and reflects achievement of expected individual student learning outcomes. Evaluation policies and procedures for individual student performance are defined and consistently applied.**

*Elaboration: Evaluation of student performance is consistent with expected individual student learning outcomes. Grading criteria are clearly defined for each course, communicated to students, and applied consistently. There are processes by which the evaluation of individual student performance is communicated to students. Student performance is evaluated by faculty. In instances where preceptors facilitate students' clinical learning experiences, faculty may seek input from preceptors regarding student performance, but ultimately faculty are responsible for evaluation of individual student learning outcomes. The requirement for evaluation of student clinical performance by qualified faculty applies to all students, including those enrolled in post-master's DNP programs. CCNE recognizes that faculty evaluation of student clinical performance may be accomplished through a variety of mechanisms.*

**Compliance Concerns?**

Baccalaureate:

No

**Rationale:** Evaluation of student performance is consistent with expected individual student learning outcomes. Grading criteria are clearly defined for each course, communicated to students through Moodle and applied consistently. Students were all aware of the grading criteria for their assignments. Each nursing course has written objectives. From those objectives faculty have made specific assignments that help students meet those objectives. For each assignment there is a published grading rubric that details how points are earned for each

individual part of the assignment. This is also true for clinical assignments. There are clinical grading rubrics that outline the performance criteria necessary to earn the allotted points for each clinical experience.

**III-G. Curriculum and teaching-learning practices are evaluated at regularly scheduled intervals to foster ongoing improvement.**

*Elaboration: Faculty use data from faculty and student evaluation of teaching-learning practices to inform decisions that facilitate the achievement of individual student learning outcomes. Such evaluation activities may be formal or informal, formative or summative. Curriculum is regularly evaluated by faculty and other communities of interest as appropriate. Data from the evaluation of curriculum and teaching-learning practices are used to foster program improvement.*

**Compliance Concerns?**

Baccalaureate:

No

**Rationale:** Faculty use data from faculty and student evaluation of teaching-learning practices to inform decisions that facilitate the achievement of individual student learning outcomes. Students evaluate the faculty twice a quarter- at the midpoint and at the end. Students also evaluate nursing courses at the end of each quarter. These data are used by faculty to make modifications to the content areas of their courses and to make changes in the delivery of their course content. In addition, these data are used to make curriculum changes. Evidence of planned curriculum revision was noted in minutes and in discussions with faculty and the dean. Due to the fact the California State Board of Nursing has to approve curriculum changes, the faculty and the dean are in the process of determining whether curricular changes should be made incrementally or implemented at one time. Feedback from the SON's advisory council and clinical affiliates are critical elements in the discussion of the following potential changes: two leadership courses being combined into one, the addition of another medical-surgical course late in the program, and finally, an immersion course as a capstone experience where students would work with preceptors as care givers and care coordinators. Some of these ideas are further along in the deliberative process than others, so actual curriculum change has not happened to date. As noted earlier, program change related to a mandatory learning laboratory requirement occurred as a result of student feedback through course evaluations and SNA representation on the student affairs committee. Faculty reviewed this request and rescinded the requirement for the "learning laboratory" study time as of Jan 1<sup>st</sup>. 2011.

**STANDARD IV**  
**PROGRAM EFFECTIVENESS: AGGREGATE STUDENT AND FACULTY OUTCOMES**

**The program is effective in fulfilling its mission, goals, and expected aggregate student and faculty outcomes. Actual aggregate student outcomes are consistent with the mission, goals, and expected student outcomes. Actual alumni satisfaction data and the accomplishments of graduates of the program attest to the effectiveness of the program. Actual aggregate faculty outcomes are consistent with the mission, goals, and expected faculty outcomes. Data on program effectiveness are used to foster ongoing program improvement.**

This standard is **met** for the baccalaureate program.

**IV-A. Surveys and other data sources are used to collect information about student, alumni, and employer satisfaction and demonstrated achievements of graduates. Collected data include, but are not limited to, graduation rates, NCLEX-RN<sup>®</sup> pass rates, certification examination pass rates, and employment rates, as appropriate.**

*Elaboration: Processes are in place for regular collection of aggregate student outcome data. For entry-level programs, the program indicates whether NCLEX-RN<sup>®</sup> pass rate data represent first-time takers and/or repeat takers. The program is expected to demonstrate how RN-to-baccalaureate program graduates as well as pre-licensure graduates achieve the expected outcomes of the baccalaureate program. Certification pass rates are obtained and reported for those graduates taking each examination, even when national certification is not required to practice in a particular state. Program evaluation data are collected on a regular basis. For each degree program, the program calculates graduation rates (number of students completing a program divided by number of students entering a program). The program specifies the entry point and the time frame used in the calculation of graduation rates. Individual programs may collect additional aggregate outcome data related to other aspects of their mission, goals, and expected student outcomes (e.g., enrollment in further graduate education).*

**Compliance Concerns?**

Baccalaureate:

No

**Rationale:** Processes are in place for the regular collection of aggregate student outcome data.

The self-study document reports measures on recruitment and retention rates and the method used for calculating student attrition and retention rates with an accounting of students who persist and those who leave for unavoidable reasons. Graduation rate is calculated by clinical cohort from enrollment. Course student satisfaction survey response rates appeared to be representative of a majority of students according to documents reviewed in the resource room. Faculty attributed the high response rate to in-class completion which provides anonymity. The alumni and the employer survey response rates have been low. According to SON faculty assessment and evaluation committee minutes of 7/21/2010, alumni from cohort one were called to inquire where they were working and for how long. While this was a valiant effort to

obtain information, SON faculty have identified an opportunity to improve response rates by implementing online surveys. Data available for review during the on-site evaluation were inclusive of those listed in CCNE standard IV-A; most data were collected beginning with the 2007 cohort. ATI exam scores, preceptor evaluations, employer satisfaction, alumni satisfaction, course effectiveness, teacher effectiveness and clinical site evaluations were also collected and available for review in the resource room.

**IV-B. Aggregate student outcome data are analyzed and compared with expected student outcomes.**

*Elaboration: Actual student outcomes data are analyzed in relation to expected student outcomes to identify areas of discrepancies. Discrepancies may indicate areas for program improvement.*

**Compliance Concerns?**

Baccalaureate: No

**Rationale:** Each course syllabus includes the measurable criteria for the course and evaluation methods utilized. Student performance is evaluated in the classroom and clinical areas on a regular basis. Every effort is made to be consistent among faculty as they evaluate students' performances. Evidence was reviewed that documented evaluation of student performance in courses. Students reported that grading practices were fair and consistent.

The SON has a timeline for program completion (36 months plus 1.5 years) and a means to assess completion. Student satisfaction with teacher effectiveness and student satisfaction with preceptor experiences are also measured. Interviews with faculty indicated that aggregate outcomes from course and teaching effectiveness evaluations were limited to one question or one aspect of the evaluation tool. Faculty, the dean, and the associate chief academic officer confirmed that all questions were not reported due to their assessment that the information was not meaningful for continuous quality improvement. All items, however, were tabulated and included in a summary document provided during the on-site evaluation. The one question selected from each of these surveys was reported and benchmarked.

All areas that were assessed met the established benchmark with the exception of ATI exam scores in 2011, and one item on a 2010 alumni survey report regarding, "Would you recommend AUHS." There were only three respondents, which provided limited information. More information on ATI exam scores and a plan of action is included in standard IV-D.

**IV-C. Aggregate student outcome data provide evidence of the program’s effectiveness in achieving its mission, goals, and expected outcomes.**

*Elaboration: The program reports aggregate data related to its expected outcomes. Reported data include student, alumni, and employer satisfaction; graduation rates; NCLEX-RN® pass rates; certification examination pass rates; employment rates; as well as data related to other program-identified expected outcomes.*

**Compliance Concerns?** Baccalaureate: No

**Rationale:** Aggregate student outcome data provided evidence of program effectiveness. Evaluators review of minutes confirmed that program outcomes are revised when opportunities for improvement are identified. Examples of student work provided evidence of program effectiveness. A poster presentation created by students, *Hepatitis B Education for the Homeless Population*, won a university award and was on display in the resource room among other work. Sample care plans and other assignments reviewed on-site were reflective of the SON mission and goals.

**IV-D. Aggregate student outcome data are used, as appropriate, to foster ongoing program improvement.**

*Elaboration: The program demonstrates use of aggregate student outcome data for program improvement when actual outcomes are not consistent with expected outcomes. Adjustments to foster ongoing program improvement are deliberate and congruent with the mission, goals, and expected student outcomes.*

**Compliance Concerns?** Baccalaureate: Yes

**Rationale:** Evaluation materials were available for review during the on-site evaluation. The following documents related to data collection and program improvement were reviewed on-site: summaries of evaluations (i.e., course and clinical site), comparison of expected and actual student outcomes, listing of type of data collected, frequency of collection and next date scheduled for measurement. The dean, associate chief academic officer and adjunct professor/CCNE coordinator confirmed during interviews that these documents and The *AUHS Assessment Evaluation Program* comprise the program evaluation. The latter document was presented in draft form. This draft has been presented to the nursing and pharmacy departments for integration but had not been formally considered at the time of the on-site evaluation. SON faculty assessment and evaluation committee minutes from 1/27/2010 and 5/8/2010 include requests for “course portfolios” to be completed on each course to be used to evaluate program effectiveness. The course portfolio should include a summary evaluation that

each instructor will write for course(s) they teach. Written summary evaluations were not available. Minutes available on-site from 1/27/2010 through 8/17/2011 reflected that evaluation forms were in revision.

SON faculty assessment and evaluation committee minutes confirmed that 1-5 Likert scale evaluation benchmarks are set at 3.5. There was no rationale given in the minutes for establishing the benchmark. On interview, the adjunct professor/CCNE coordinator stated that 3.5 was selected as the benchmark because it was above average. Student outcome data indicated that most benchmarks have been met; i.g. NCLEX-RN® scores; however faculty verbalized that they were concerned about the specificity and amount of acute medical-surgical and critical care content in the curriculum. This concern was also confirmed by students. Faculty meeting minutes describe curriculum review related to this concern. Students verbalized that their concerns were heard by the faculty and may have led to the hiring of one additional faculty with medical-surgical expertise and teaching experience.

The dean and faculty described the use of 2011 ATI assessment scores to foster ongoing program improvement. Faculty noted a decline in 2011 ATI assessment scores. A passing ATI score of 76% was selected based on the predicted probability of 96% in passing the NCLEX-RN® (ATI Comprehensive Probability of Passing Table). The benchmark set for 65% of students to achieve the 76% score was met in 2009, but fell short in 2011. Evidence was reviewed on site of a documented plan of action in the SON faculty assessment and evaluation committee minutes that is in place for the August 2011 graduating class. The plan of action includes weekly quizzes, utilization of NCLEX-RN® style questions on exams, requirement of five hundred ATI test questions weekly, and a weekly proctored test. Students were aware of this plan of action and stated that they appreciated the faculty's attention to their progress and eventual success.

Aggregate student course and faculty evaluations are summarized and reviewed according to SON faculty assessment and evaluation committee minutes. As of the 11/20/2010 meeting, however, revised evaluation forms were not final. During interviews with students, they indicated that faculty responded appropriately to their concerns and provided frequent opportunities to discuss courses and the program as a whole.

SON faculty assessment and evaluation committee minutes state that a new committee needs to be formed to address issues related to relationships with the community of interest. According to the dean and faculty, a community advisory board is now in place and the SON has identified an opportunity to incorporate feedback from this group, preceptors, and other members of the community of interest into the formal evaluation process.

**IV-E. Aggregate faculty outcomes are consistent with and contribute to achievement of the program's mission, goals, and expected student outcomes.**

*Elaboration: Aggregate faculty outcomes reflect the program's mission, goals, and expected student outcomes. For example, if research is an identified element of the program's mission, faculty research productivity should be assessed as an expected faculty outcome. If research is not part of the identified mission, it would not be expected as a faculty outcome. Evaluation of faculty outcomes is consistent with the institution's and program's definition(s) of faculty role expectations. There is congruence between expectations of the faculty in their roles and evaluation of faculty performance.*

**Compliance Concerns?**

Baccalaureate:

No

**Rationale:** The aggregate faculty evaluation process defined in the faculty handbook and faculty outcomes reflect the program's mission, goals and expected student outcomes. There was evidence provided on site of research and scholarship currently underway or completed by SON faculty which demonstrates consistency with the mission. The faculty handbook defined the faculty evaluation, annual review process and elements of the review. The evaluation process reflected congruence between the mission and goals, role expectations and evaluation of performance as it related to expected student outcomes.

Review of the self-study document and other materials in the resource room including faculty curriculum vitae, committee minutes, faculty research and manuscripts reflected comprehensive evidence of the variety of ways in which faculty demonstrated scholarly activities that contribute to the mission of the university and nursing program. SON faculty have held offices in professional nursing organizations, presented at conferences and published articles, as well as attended conferences. The president and vice president of the governing board confirmed that the SON faculty were awarded a two-year grant in 2008 to improve college pass rates of minority students through provision of supportive services. The SON faculty as a group produce outcomes which fully contribute to the achievement of the program's mission, goals and expected student outcomes.

**IV-F. Information from formal complaints is used, as appropriate, to foster ongoing program improvement.**

*Elaboration: If formal complaints indicate a need for program improvement, there is evidence that action has been taken to address that need.*

**Compliance Concerns?**

Baccalaureate: No

**Rationale:** The nursing program student handbook and website provides information about policies that address formal complaints and grievances. Students are expected to first approach their instructor to resolve the issue informally. If the student is uncomfortable in approaching the instructor, the student may seek support from his/her academic advisor or the dean. Complaints can also be handled through the student affairs committee and office of the assistant dean for student affairs. On interview, students indicated that they were aware of the policies. Students are required to sign acknowledgement of the new student handbook which includes the complaint and grievance procedures.

According to the self-study document and interview with the SON dean, there have been no formal complaints for the nursing program since its inception.